



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

NOVEMBER 8, 2001

6187-753-3

ILLINOIS CORPORATION SERVICE C
700 SOUTH 2ND ST
SPRINGFIELD, ILLINOIS 62704-0000

RE VOICE CONNECTIONS, INC.

DEAR SIR OR MADAM:

IT IS OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND THE AUTHORITY ACKNOWLEDGING REGISTRATION.

THIS DOCUMENT MUST BE RECORDED IN THE OFFICE OF THE RECORDER OF THE COUNTY IN ILLINOIS IN WHICH THE REGISTERED OFFICE OF THE CORPORATION IS LOCATED, AS PROVIDED BY SECTION 1.10 OF THE BUSINESS CORPORATION ACT OF THIS STATE. FOR FURTHER INFORMATION CONTACT YOUR RECORDER OF DEEDS.

THE CORPORATION MUST FILE AN ANNUAL REPORT AND PAY FRANCHISE TAXES PRIOR TO THE FIRST DAY OF ITS ANNIVERSARY MONTH (MONTH OF QUALIFICATION) NEXT YEAR. A PRE-PRINTED ANNUAL REPORT FORM WILL BE SENT TO THE REGISTERED AGENT AT THE ADDRESS SHOWN ON THE RECORDS OF THIS OFFICE APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH.

SECURITIES CANNOT BE ISSUED OR SOLD EXCEPT IN COMPLIANCE WITH THE ILLINOIS SECURITIES LAW OF 1953, 815 ILLINOIS COMPILED STATUTES, 5/1 ET SEQ. FOR FURTHER INFORMATION, CONTACT THE OFFICE OF THE SECRETARY OF STATE, SECURITIES DEPARTMENT AT (217) 782-2256 OR (312) 793-3384.

SINCERELY YOURS,

Jesse White

JESSE WHITE
SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES
CORPORATION DIVISION
TELEPHONE (217) 782-6961

JW:CD

OFFICIAL FILE

I.C.C. DOCKET NO. 02-0162

Appl Exhibit No. 1

Witness _____

Date 3-28-02 Reporter BAP

Form **BCA-13.15**
 (Rev. Jan. 1999)

**APPLICATION FOR CERTIFICATE
 OF AUTHORITY TO
 TRANSACT BUSINESS IN ILLINOIS**

SUBMIT IN DUPLICATE

Jesse White, Secretary of State
 Department of Business Services
 Springfield, IL 62758
 Telephone (217) 782-1834
 http://www.sos.state.il.us

This space for use by Secretary of State

FILED

NOV 03 2001

JESSE WHITE
 SECRETARY OF STATE

This space for use by
 Secretary of State

Date 11-8-01
 License Fee \$
 Franchise Tax \$ 25
 Filing Fee \$ 75
 Penalties \$
 Approved: W 100

Payment must be made by
 certified check, cashier's check,
 Illinois attorney's check, Illinois
 C.P.A.'s check or money order,
 payable to "Secretary of State."

1. (a) CORPORATE NAME: Voice Connections, Inc.

(Complete item 1 (b) only if the corporate name is not available in this state.)

(b) ASSUMED CORPORATE NAME: _____

(By electing this assumed name, the corporation hereby agrees NOT to use its corporate name in the transaction of business in Illinois. Form BCA 4.15 is attached.)

2. (a) State or Country of Incorporation: Florida

(b) Date of Incorporation: 3-12-97

(c) Period of Duration: Perpetual

3. (a) Address of the principal office, wherever located: (b) Address of principal office in Illinois:
 (If none, so state)

1100 5th Avenue South

Suite 410

Naples, FL 34102

None

4. Name and address of the registered agent and registered office in Illinois.

Registered Agent Illinois Corporation Service Company

First Name

Middle Name

Last Name

Registered Office 700 South Second Street

Number

Street

Suite #

Springfield

62704

Sangamon

City

Zip Code

County

5. States and countries in which it is admitted or qualified to transact business: (Include state of incorporation)

Florida, New York and California

6. Names and residential addresses of officers and directors:

Name	No. & Street	City	State	ZIP
<u>President Rajman Chowdhury</u>	<u>1100 5th Avenue South, #410,</u>	<u>Naples, FL</u>	<u>34102</u>	
<u>Secretary Sachiko Okura</u>	<u>1100 5th Avenue South, #410,</u>	<u>Naples FL</u>	<u>34102</u>	
<u>Director</u>				
<u>Director</u>				
<u>Director</u>				

If more than 3, attach list

7. Purpose or purposes proposed to be pursued in transacting business in this state:
(If not sufficient space to cover this point, add one or more sheets of this size.)

Market telecommunications services to residents and businesses.

8. Authorized and issued shares:

Class	Series	Par Value	Number of Shares Authorized	Number of Shares Issued
Common	Common	none	1,000	1,000

9. Paid-in Capital: \$ 550,000.00

("Paid-in Capital" replaces the terms Stated Capital & Paid-in Surplus and is equal to the total of these accounts.)

10. (a) Give an estimate of the total value of all the property* of the corporation for the following year: \$ 1,500,000.00
- (b) Give an estimate of the total value of all the property* of the corporation for the following year that will be located in Illinois: \$ 0.00
- (c) State the estimated total business of the corporation to be transacted by it everywhere for the following year: \$ 25,000,000.00
- (d) State the estimated annual business of the corporation to be transacted by it at or from places of business in the State of Illinois: \$ 150,000.00

11. Interrogatories: (Important - this section must be completed.)

Florida location

11005th Ave. Se., #410, Naples, FL 34102

- (a) Office or offices to which all contracts with the corporation are forwarded for final acceptance:
- (b) Number of shares of all classes owned by residents of Illinois: 0
- (c) Number of shares of all classes owned by non-residents of Illinois: 1,000
- (d) Is the corporation transacting business in this state at this time? no
- (e) If the answer to item 11(d) is yes, state the exact date on which it commenced to transact business in Illinois:

12. This application is accompanied by a certified copy of the articles of incorporation, as amended, duly authenticated, within the last ninety (90) days, by the proper officer of the state or country wherein the corporation is incorporated.

13. The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in **BLACK INK**.)

Dated October 26, 2001
(Month & Day) (Year)
attested by Sachiko Okura
(Signature of Secretary or Assistant Secretary)
Sachiko Okura, Secretary
(Type or Print Name and Title)

Voice Connections, Inc.
(Exact Name of Corporation)
Rahman Chowdhury
(Signature of President or Vice President)
by Rahman Chowdhury, President
(Type or Print Name and Title)

* PROPERTY as used in this application shall apply to all property of the corporation, real, personal, tangible, intangible, or mixed without qualifications.

** When the response to #11(a) list ONLY an Illinois address, then the total business as reflected in #10(c) is also considered to be Illinois business for the purpose of computing the Illinois allocation factor. By signing this application, the corporation affirms that it is aware that the amount of paid-in capital, and consequently the amount of license fees and franchise taxes, may be proportionately higher due to the Illinois address shown under #11(a).